

**Political Organization
Report of Contributions and Expenditures**

OMB No. 1545-1696

► See separate instructions.

A For the period beginning 01/01/2013 and ending 06/30/2013

B Check applicable box: ☐ Initial report ☒ Change of address ☒ Amended report ☐ Final report

1 Name of organization Jackson County Democratic Party **Employer identification number** 27 - 1621238

2 Mailing address (P.O. box or number, street, and room or suite number)
P. O. Box 471

City or town, state, and ZIP code
Jefferson, GA 30549

3 E-mail address of organization: no@email **4** Date organization was formed: 01/01/1990

5a Name of custodian of records John A. Muthe **5b** Custodian's address
464 Briarcrest Drive
Jefferson, GA 30549 - 7362

6a Name of contact person John A. Muthe **6b** Contact person's address
464 Briarcrest Drive
Jefferson, GA 30549 - 7362

7 Business address of organization (if different from mailing address shown above). Number, street, and room or suite number
P. O. Box 471

City or town, state, and ZIP code
Jefferson, GA 30549

8 Type of report (check only one box)

- | | |
|------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> First quarterly report
(due by April 15) | <input type="checkbox"/> Monthly report for the month of:
(due by the 20th day following the month shown above, except the
December report, which is due by January 31) |
| <input type="checkbox"/> Second quarterly report
(due by July 15) | <input type="checkbox"/> Pre-election report (due by the 12th or 15th day before the election) |
| <input type="checkbox"/> Third quarterly report
(due by October 15) | (1) Type of election: |
| <input type="checkbox"/> Year-end report
(due by January 31) | (2) Date of election: |
| <input checked="" type="checkbox"/> Mid-year report (Non-election
year only-due by July 31) | (3) For the state of: |
| | <input type="checkbox"/> Post-general election report (due by the 30th day after general election) |
| | (1) Date of election: |
| | (2) For the state of: |

9 Total amount of reported contributions (total from all attached Schedules A) **9.** \$ 0

10 Total amount of reported expenditures (total from all attached Schedules B) **10.** \$ 334

Under penalties of perjury, I declare that I have examined this report, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete.

John A. Muthe, Treasurer

07/09/2013

**Sign
Here**



Signature of authorized official



Date

Schedule A	Itemized Contributions	Schedule A
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Schedule B Itemized Expenditures

Schedule B

Recipient's name, mailing address and ZIP code

Irene Muthe
P. O. Box 471
Jefferson, GA 30549

Name of recipient's employer

M/A
Recipients's occupation
N/A

Amount of Expenditure

\$ 66
Date of expenditure
01/10/2013

Purpose of expenditure

Reimbursement for food costs - Social Event

Recipient's name, mailing address and ZIP code

Wells Fargo Bank N.A.
P. O. Box 6995
Portland, OR 97228 - 6995

Name of recipient's employer

N/A
Recipients's occupation
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Amount of Expenditure

\$ 85
Date of expenditure
05/09/2013

Purpose of expenditure

Check Printing Charges

Recipient's name, mailing address and ZIP code

Barbara White
P. O. Box 471
Jefferson, GA 30549

Name of recipient's employer

N/A
Recipients's occupation
N/A

Amount of Expenditure

\$ 14
Date of expenditure
01/11/2013

Purpose of expenditure

Reimbursement for food costs - Social event

Recipient's name, mailing address and ZIP code

Linda Meyer
P. O. Box 471
Jefferson, GA 30549

Name of recipient's employer

N/A
Recipients's occupation
N/A

Amount of Expenditure

\$ 100
Date of expenditure
05/09/2013

Purpose of expenditure

Reimbursement for Deposit on rental of County Facility for Social Event

Recipient's name, mailing address and ZIP code

Jefferson MPO
Lee Street
Jefferson, GA 30549 -

Name of recipient's employer

N/A
Recipients's occupation
N/a

Amount of Expenditure

\$ 45
Date of expenditure
03/12/2013

Purpose of expenditure

Postage Stamps

Recipient's name, mailing address and ZIP code

Wells Fargo Bank N.A.
P. O. Box 6995
Portland, OR 97228 - 6995

Name of recipient's employer

N/A
Recipients's occupation
Commercial Bank

Amount of Expenditure

\$ 24
Date of expenditure
03/19/2013

Purpose of expenditure

Checking Fees